



State of Connecticut
Department of Developmental Services

DDS

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**DEPARTMENT OF DEVELOPMENTAL SERVICES TESTIMONY
BEFORE THE INSURANCE AND REAL ESTATE COMMITTEE**

March 3, 2015

Senator Crisco, Representative Megna, Senator Kelly, Representative Sampson and members of the Insurance and Real Estate Committee. I am Morna A. Murray, J.D., Commissioner of the Department of Developmental Services (DDS). Today, I offer you testimony in support of the Governor's Bill **H.B. No. 6847** **AN ACT ENHANCING ACCESS TO BEHAVIORAL HEALTH SERVICES AND SERVICES FOR YOUTHS WITH AUTISM SPECTRUM DISORDER.**

On January 1, 2015, Connecticut began implementing a recent directive from the federal Centers for Medicare and Medicaid Services (CMS) for Medicaid coverage of a variety of medically necessary Autism Spectrum Disorder (ASD) services pursuant to Early and Periodic Screening, Diagnostic and Treatment (EPSDT) entitlements under Medicaid. These services are available to Medicaid-eligible children under the age of 21. In 2014 two nationally recognized autism research institutes identified lists of ASD treatment practices that can be considered to have a solid evidence-base. EPSDT benefits may include any of these treatments. Services may also include intensive behavioral support using Applied Behavioral Analysis (ABA) therapy.

Connecticut has made great strides over the past decade in improving access to much needed ASD services and this bill furthers that momentum. **H.B. No. 6847** makes changes to the statutes governing group and individual insurance plans in the state to assure that there is consistent coverage between these plans and the newly designed Medicaid benefit.

The bill also proposes to eliminate the maximum benefit limits in the Birth-to-Three System statutes for all Birth-to-Three services, including those services for which an individual has a diagnosis of ASD. In light of the elimination of dollar limits in the Affordable Care Act, it was felt that the dollar limit should be removed for both ABA therapy and all other Birth-to-Three ASD services.

The goal of Section 5 of **H.B. No. 6847** is to establish a process that ensures ASD services and interventions covered by insurance are consistent with EPSDT and demonstrate empirical

effectiveness for the treatment of ASD. On a technical note, the reference to the Council in this section of the bill should read Autism Spectrum Disorder Advisory Council.

I want to clarify that the proposed deletion of language that grandfathers coverage for individuals diagnosed with ASD prior to the release of the fifth edition of the American Psychiatric Association's "Diagnostic and Statistical Manual of Mental Disorders" (DSM-5) is not intended to have any negative impact on coverage for ASD services. This language was added to statute before the DSM-5 was released.

The data to be collected by the working group established in Section 7 of the bill will provide valuable information and will better inform the state about behavioral health utilization and quality measures. DDS looks forward to participating in this process.

Thank you again for the opportunity to offer testimony in support of this important bill. I would be happy to answer any questions that you have for me at this time, or you may contact Christine Pollio Cooney, DDS Director of Legislative and Executive Affairs at (860) 418-6066 for additional information.